Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF MARYLAND		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

### Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	Part 1: Identify Yourself						
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):				
1.	Your full name						
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	Christopher First name  Thomas Middle name  Smith Last name and Suffix (Sr., Jr., II, III)	Brandy First name  Lynn Middle name  Smith Last name and Suffix (Sr., Jr., II, III)				
2.	All other names you have used in the last 8 years Include your married or maiden names.	Christopher T Smith Chris Smith Christop T Smith	Brandy Lynn Biensach Brandy Smith Brandy Nonemaker Brandy L. Banks				
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2209	xxx-xx-0026				

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Case number (if known)

**Christopher Thomas Smith** 

**Brandy Lynn Smith** 

Debtor 1

Debtor 2

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 1946 Perryman Road Aberdeen, MD 21001 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Harford County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, I have lived in this district longer than in any have lived in this district longer than in any other other district. district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

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	btor 2 Brandy Lynn Smit					Case number (if known)	
Par	rt 2: Tell the Court About	Your Bankı	ruptcy Case				
7.	The chapter of the Bankruptcy Code you are			escription of each, see		by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptoriate box.	су
	choosing to file under	■ Chapte	er 7				
		☐ Chapte	er 11				
		☐ Chapte	er 12				
		☐ Chapte	er 13				
8.	How you will pay the fee	abo orde a pr	out how you ma er. If your attori re-printed addre	y pay. Typically, if you ney is submitting your ess.	are paying the fee payment on your b	heck with the clerk's office in your local court for more de yourself, you may pay with cash, cashier's check, or moehalf, your attorney may pay with a credit card or check option, sign and attach the Application for Individuals to F	oney with
		The l rec but app	e Filing Fee in I quest that my is not required lies to your fan	nstallments (Official For fee be waived (You noto, waive your fee, and hily size and you are u	orm 103A). hay request this op d may do so only if hable to pay the fe	otion only if you are filing for Chapter 7. By law, a judge r f your income is less than 150% of the official poverty lin the in installments). If you choose this option, you must fill official Form 103B) and file it with your petition.	may, ie that
9.	Have you filed for	■ No.					
	bankruptcy within the last 8 years?	☐ Yes.					
	•		District		When	Case number	
			District		14/1	Case number	
			District		When	Case number	
10.	Are any bankruptcy	■ No					
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.					
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	,	■ No.	Go to line 12	2.			
	residence?	☐ Yes.	Has your lar	ndlord obtained an evi	ction judgment aga	ainst you?	
			□ No.	Go to line 12.			
			_	Fill out <i>Initial Stateme</i> bankruptcy petition.	ent About an Evicti	on Judgment Against You (Form 101A) and file it as part	t of

# Case 19-14249 Doc 1 Filed 03/29/19 Page 4 of 59

	tor 1 Christopher Thom tor 2 Brandy Lynn Smit		1	Case number (if known)			
Par	Report About Any Bu	sinesses	You Own as a Sole Proprie	tor			
12.	2. Are you a sole proprietor of any full- or part-time ■ No. Go to Part 4. business?						
		☐ Yes.	Yes. Name and location of business				
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, Sta	te & ZIP Code			
	it to this petition.	Check the appropriate box to describe your business:					
			☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))				
			☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))				
			Stockbroker (as defined in 11 U.S.C. § 101(53A))				
			Commodity Broker (as defined in 11 U.S.C. § 101(6))				
			□ None of the above             □	8			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	re filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate es. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of ons, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure S.C. 1116(1)(B).				
	For a definition of small	■ No.	I am not filing under Chap	oter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	11, but I am NOT a small business debtor according to the definition in the Bankruptcy			
		☐ Yes.	I am filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Par	t 4: Report if You Own or	Have Any	Hazardous Property or An	y Property That Needs Immediate Attention			
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and	■ No. □ Yes.	What is the hazard?				
identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? If immediate attention is needed, why is it needed?							
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?				
				Number, Street, City, State & Zip Code			

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Debtor 1 Christopher Thomas Smith
Debtor 2 Brandy Lynn Smith Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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	tor 1 tor 2	Christopher Thom Brandy Lynn Smit				Case nu	umber (if known)	
Part	6:	Answer These Questi	ons for Rep	orting Purposes				
16.		kind of debts do		Are your debts primarily consundividual primarily for a personal,			e defined in 11 U.S.C.	§ 101(8) as "incurred by an
				☐ No. Go to line 16b.				
				Yes. Go to line 17.				
				<b>Are your debts primarily business debts?</b> Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.				
				☐ No. Go to line 16c.				
			_	☐ Yes. Go to line 17.				
			16c. S	State the type of debts you owe that	at are not consur	ner debts or bu	siness debts	
17.		ou filing under oter 7?	□ No. I	am not filing under Chapter 7. Go	to line 18.			
	after prop	ou estimate that any exempt erty is excluded and	<b>—</b> 163.	am filing under Chapter 7. Do you are paid that funds will be available				and administrative expenses
	are paid that funds will			No				
	be available for distribution to unsecured creditors?		Γ	☑ Yes				
18.		many Creditors do	<b>1</b> -49		<b>1</b> ,000-5,000		□ 25,001-	50,000
	you o	estimate that you	□ 50-99		☐ 5001-10,000		☐ 50,001-	
			□ 100-199 □ 10,001-25,000 □ 200-999		□ More th	an100,000		
19.		much do you	□ \$0 - \$50	0,000	□ \$1,000,001 -	- \$10 million	<b>□</b> \$500,00	00,001 - \$1 billion
		nate your assets to orth?		- \$100,000	\$10,000,001			000,001 - \$10 billion
				11 - \$500,000 11 - \$1 million	□ \$50,000,001 □ \$100,000,00			0,000,001 - \$50 billion an \$50 billion
20.		much do you	□ \$0 - \$50	),000	□ \$1,000,001 ·	- \$10 million	<b>□</b> \$500,00	00,001 - \$1 billion
	estin to be	nate your liabilities ?		1 - \$100,000	□ \$10,000,001			,000,001 - \$10 billion
				11 - \$500,000 11 - \$1 million	□ \$50,000,001 □ \$100,000,00			0,000,001 - \$50 billion nan \$50 billion
Part	7:	Sign Below						
For	you		I have exar	nined this petition, and I declare u	inder penalty of p	erjury that the i	information provided is	s true and correct.
If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 1 United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.								
If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					ielp me fill out this			
			I request re	lief in accordance with the chapte	er of title 11, Unite	ed States Code,	, specified in this petiti	ion.
			bankruptcy and 3571.	d making a false statement, conce case can result in fines up to \$25				
				opher Thomas Smith ner Thomas Smith		/s/ Brandy L Brandy Lyn		
			Signature of			Signature of D		
			Executed o	n <b>March 29, 2019</b>		Executed on	March 29, 2019	
				MM / DD / YYYY			MM / DD / YYYY	

# Case 19-14249 Doc 1 Filed 03/29/19 Page 7 of 59

Debtor 1 Christopher Thon Debtor 2 Brandy Lynn Smi		Case number (if known)		
For your attorney, if you are represented by one	I, the attorney for the debtor(s) named in this petition, under Chapter 7, 11, 12, or 13 of title 11, United States for which the person is eligible. I also certify that I have	Code, and have e e delivered to the c	explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)	
If you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4)(D) applies, certify schedules filed with the petition is incorrect.	hat I have no know	ledge after an inquiry that the information in the	
	/s/ Wilbur W. Bolton	Date	March 29, 2019	
	Signature of Attorney for Debtor	<del></del>	MM / DD / YYYY	
	Wilbur W. Bolton 01490 Printed name			
	Bolton & Kearney, P.A.			
	Firm name			
	102 S. Park Street			
	Aberdeen, MD 21001			
	Number, Street, City, State & ZIP Code			
	Contact phone <b>410-272-5757</b>	Email address	boltonkearneybnkr@comcast.net	
	01490 MD			
	Bar number & State		<del></del>	

### Case 19-14249 Doc 1 Filed 03/29/19 Page 8 of 59

FIII	in this information to identify your case:		
Deb	btor 1 Christopher Thomas Smith First Name Middle Name Last Name		
Deb	btor 2 Brandy Lynn Smith		
(Spo	ouse if, filing) First Name Middle Name Last Name		
Uni	ited States Bankruptcy Court for the: DISTRICT OF MARYLAND		
Cas	se number		
(if kn	nown)		Check if this is an
			amended filing
	ficial Form 106Sum	<b>.</b> n	40/45
	Immary of Your Assets and Liabilities and Certain Statistical Information as complete and accurate as possible. If two married people are filing together, both are equally responsible.		12/15
info	rmation. Fill out all of your schedules first; then complete the information on this form. If you are filing am r original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
Par	rt 1: Summarize Your Assets		
			<b>Your assets</b> Value of what you own
			value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B		\$ 0.00
	1b. Copy line 62, Total personal property, from Schedule A/B		\$ 57,285.00
	1c. Copy line 63, Total of all property on Schedule A/B		\$ 57,285.00
			Ψ <u> 01,200.00</u>
Par	rt 2: Summarize Your Liabilities		
			Your liabilities
		,	Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule	D	\$45,000.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)		
٥.	3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>		\$
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	· <b>···</b>	\$ 47,285.58
	Your total liabili	itios ¢	02 205 50
	Tour total habit	πes   Ψ_	92,285.58
Par	rt 3: Summarize Your Income and Expenses		
	·		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I		\$ 5,600.00
5.	Schedule J: Your Expenses (Official Form 106J)		\$ 7,164.00
Dox	Copy your monthly expenses from line 22c of Schedule J		Ψ <u></u>
Par	Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with	th your of	her schedules.
_	■ Yes		
7.	What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	y for a pe	ersonal, family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check the court with your other schedules.	k this box	and submit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

### Case 19-14249 Doc 1 Filed 03/29/19 Page 9 of 59

	Christopher Thomas Smith	
Debtor 2	Brandy Lynn Smith	Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

5,600.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

### Case 19-14249 Doc 1 Filed 03/29/19 Page 10 of 59

F:II :	Alaia info		and this fillings			
		ormation to identify your case a				
Debto	or 1	Christopher Thomas S First Name	mith Middle Name	Last Name		
Debto (Spouse	or 2 e, if filing)	Brandy Lynn Smith First Name	Middle Name	Last Name		
United	d States E	Bankruptcy Court for the: DISTE	RICT OF MARYLAND			
Case	number			-		☐ Check if this is an amended filing
						amondou ming
Offi	cial F	orm 106A/B				
		ile A/B: Property	M			40/45
		, separately list and describe items		n asset fits in more than one	category list the ass	12/15
think it informa	fits best.	Be as complete and accurate as poore space is needed, attach a separe	ossible. If two married people	are filing together, both are	equally responsible f	or supplying correct
Part 1	Describ	pe Each Residence, Building, Land,	or Other Real Estate You Ow	n or Have an Interest In		
1 Do y	ou own o	r have any legal or equitable intere	st in any residence building	land or similar property?		
`		,	ot in any rootaonoo, banang,	iana, or ominar property.		
_	lo. Go to F					
ЦΥ	es. Where	e is the property?				
Part 2	Describ	pe Your Vehicles				
		ease, or have legal or equitable trives. If you lease a vehicle, also				ny vehicles you own that
3. <b>Car</b>	s, vans,	trucks, tractors, sport utility ve	hicles, motorcycles			
	No					
<b>■</b> Y						
3.1	Make:	Dodge	Who has an interest in the	e property? Check one		red claims or exemptions. Put ecured claims on Schedule D:
	Model:	2019	Debtor 1 only		Creditors Who Have	e Claims Secured by Property.
	Year: Approxim	nate mileage: 4000	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 of	only	Current value of th entire property?	e Current value of the portion you own?
ı	Other info	ormation:	☐ At least one of the debte	ors and another		
			Check if this is commu	unity property	\$50,000.0	\$50,000.00
		aircraft, motor homes, ATVs an				
Exa	mples: Bo	oats, trailers, motors, personal wa	atercraft, fishing vessels, sn	owmobiles, motorcycle acc	essories	
	No					
	es/es					
5 <b>A</b> d	ld the do	llar value of the portion you ow	n for all of your entries fr	om Part 2, including any	entries for	
		have attached for Part 2. Write				\$50,000.00
B. 40	<b>.</b>	. V B			_	
		pe Your Personal and Household It r have any legal or equitable in		ing items?		Current value of the
,		7 - 3 - 1 - 1 - 1 - 1	,	·		portion you own? Do not deduct secured claims or exemptions.
		<b>goods and furnishings</b> Major appliances, furniture, linens	, china, kitchenware			

□ No
Official Form 106A/B
Schedule A/B: Property

# Case 19-14249 Doc 1 Filed 03/29/19 Page 11 of 59

	ebtor 1 ebtor 2	Christopher Brandy Lynr	Thomas Smith n Smith	Case number (if known	)
	Yes.	Describe			
			Cooking utensils, silverware, dining roo chairs, bedroom furniture, living room fulamps		\$1,150.00
7.	□ No	es: Televisions a	nd radios; audio, video, stereo, and digital equipme phones, cameras, media players, games	ent; computers, printers, scanners; music	collections; electronic devices
			Televisions x2 and cell phones		\$800.00
8.	Example  No		figurines; paintings, prints, or other artwork; books ons, memorabilia, collectibles	, pictures, or other art objects; stamp, coi	n, or baseball card collections;
9.	Example  No	ent for sports and estromotion Sports, photo musical instruction	graphic, exercise, and other hobby equipment; bic	ycles, pool tables, golf clubs, skis; canoes	s and kayaks; carpentry tools;
10.	■ No		s, shotguns, ammunition, and related equipment		
11.	□ No		othes, furs, leather coats, designer wear, shoes, ac	ccessories	
			All mens and ladies clothing		\$500.00
12.	□ No		welry, costume jewelry, engagement rings, weddin  Wedding rings and watches	g rings, heirloom jewelry, watches, gems,	gold, silver
13.	Examp ■ No	rm animals  les: Dogs, cats,  Describe	birds, horses		
14.	Any oth	her personal an	d household items you did not already list, incl	uding any health aids you did not list	
	☐ Yes.	Give specific inf	ormation		
15			of all of your entries from Part 3, including any number here		\$3,000.00

Official Form 106A/B Schedule A/B: Property page 2

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	btor 1 btor 2	Christopher T Brandy Lynn S			Case number (if known)	
Pa	rt 4: De	scribe Your Financia	al Assets			
			al or equitable interest i	n any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	□ No Î		ve in your wallet, in your h	•	on hand when you file your petitio	on
					Cash	\$25.00
				counts; certificates of deposit; shats with the same institution, list ea	ares in credit unions, brokerage h ach.	ouses, and other similar
	Yes			Institution name:		
			17.1. Checking		g account in name of andy Smith, account no nce in account	\$680.00
	Examp ■ No		publicly traded stocks vestment accounts with b	rokerage firms, money market ac	ccounts	
	Non-pu joint v				usinesses, including an interes	t in an LLC, partnership, and
	■ No □ Yes.	Give specific infor	mation about them Name of entity:		% of ownership:	
	Negoti Non-ne ■ No	<i>iable instrument</i> s in	clude personal checks, cants are those you cannot to	potiable and non-negotiable ins ashiers' checks, promissory notes ransfer to someone by signing or	s, and money orders.	
	<b>□</b> 163.	Oive specific inform	Issuer name:			
21.		ment or pension a ples: Interests in IR.		403(b), thrift savings accounts, o	or other pension or profit-sharing	plans
		List each account s	separately. Type of account:	Institution name:		
	Your s		deposits you have made s	so that you may continue service t, public utilities (electric, gas, wa	or use from a company ter), telecommunications compan	ies, or others
	Yes.			Institution name or indivi	idual:	
				Ali Begvnich, 3420 M Aberdeen, MD 21001		\$1,600.00
	■ No □ Yes	lssu	er name and description.	ney to you, either for life or for a r	number of years)	

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

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	tor 1 otor 2	Christoph Brandy Ly	er Thomas Smit nn Smith	h		ase number (if known)	
_	■ No		Institution name o	ad description. Congretaly file the	records of any interes	oto 11 II C C & E21/o):	
_	Yes			nd description. Separately file the			
	No	·	future interests in information about t	property (other than anything I	isted in line 1), and	rights or powers exerci	sable for your benefit
_				e secrets, and other intellectual sites, proceeds from royalties and		es	
	Yes.	Give specific	information about t	hem			
_			s, and other gene permits, exclusive li	ral intangibles censes, cooperative association h	oldings, liquor license	es, professional licenses	
	Yes.	Give specific	information about t	hem			
Mor	ney or p	property owe	d to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
_	Tax ref	unds owed to	o you				
	Yes.	Give specific i	nformation about th	nem, including whether you alread	y filed the returns and	d the tax years	
				State of Maryland tax refur	nd 2018	Federal and state	\$580.00
30. (	No Yes. Other a Examp	Give specific i amounts som oles: Unpaid w	nformation eone owes you ages, disability insi unpaid loans you n	ny, spousal support, child support, urance payments, disability benefit nade to someone else	·		
		·	_	O			¢4 400 00
			L	One weeks wages for Christ	opner Smith		\$1,400.00
_		ts in insurand bles: Health, di		rance; health savings account (HS	A); credit, homeowne	er's, or renter's insurance	
	Yes. I	Name the insu	urance company of Company	each policy and list its value. name:	Beneficiary	y:	Surrender or refund value:
_	If you a			u from someone who has died t, expect proceeds from a life insur	rance policy, or are c	urrently entitled to receive	e property because
_	■ No □ Yes.	Give specific	information				
				or not you have filed a lawsuit outes, insurance claims, or rights to		or payment	
	Yes.	Describe eac	h claim				
O#:-	ial Far-	n 106 \/D		Cohodulo A/P: Dro	norty.		n A

Official Form 106A/B Schedule A/B: Property page 4

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Debtor 1 Debtor 2	•		Case number (if known)	
■ No	er contingent and unliquidated claims of every nature, inclues  s. Describe each claim	uding counterclaims o	of the debtor and rights to set	off claims
	financial assets you did not already list			
■ No				
☐ Ye	s. Give specific information			
	d the dollar value of all of your entries from Part 4, includir Part 4. Write that number here			\$4,285.00
Part 5:	Describe Any Business-Related Property You Own or Have an Inter	rest In. List any real esta	ate in Part 1.	
37. <b>Do yo</b>	ou own or have any legal or equitable interest in any business-relat	ed property?		
No.	Go to Part 6.			
☐ Yes	. Go to line 38.			
	Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	ı Own or Have an Interes	st In.	
46. <b>Do y</b>	ou own or have any legal or equitable interest in any farm-	or commercial fishin	g-related property?	
<b>I</b>	lo. Go to Part 7.			
	es. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Interest in That You	u Did Not List Above		
Exa	ou have other property of any kind you did not already list mples: Season tickets, country club membership	?		
■ No	o es. Give specific information			
	3. Give specific information			1
54. <b>Ad</b>	d the dollar value of all of your entries from Part 7. Write th	at number here	······	\$0.00
Part 8:	List the Totals of Each Part of this Form			_
55. <b>Pa</b> i	rt 1: Total real estate, line 2			\$0.00
56. <b>Pa</b> i	rt 2: Total vehicles, line 5	\$50,000.00	-	· ·
57. <b>Pa</b> i	rt 3: Total personal and household items, line 15	\$3,000.00		
58. <b>Pa</b> i	rt 4: Total financial assets, line 36	\$4,285.00		
	rt 5: Total business-related property, line 45	\$0.00		
	rt 6: Total farm- and fishing-related property, line 52	\$0.00		
61. <b>Pa</b> i	rt 7: Total other property not listed, line 54 +	\$0.00		
62. <b>To</b>	tal personal property. Add lines 56 through 61	\$57,285.00	Copy personal property total	\$57,285.00
63. <b>To</b>	tal of all property on Schedule A/B. Add line 55 + line 62		_	\$57,285.00

Official Form 106A/B Schedule A/B: Property page 5

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Fill in this inform				
Debtor 1				
	First Name	Middle Name	Last Name	
Debtor 2	Brandy Lynn Smi	th		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		DISTRICT OF MARYLAND		
Case number _				☐ Check if this is an
(				amended filing

### Official Form 106C

### Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B		ount of the exemption you claim  ck only one box for each exemption.	Specific laws that allow exemption	
2019 Dodge Ram 4000 miles Line from <i>Schedule A/B</i> : 3.1	\$50,000.00		\$5,000.00  100% of fair market value, up to any applicable statutory limit	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)	
Cooking utensils, silverware, dining room furniture, tables & chairs, bedroom furniture, living room furniture, dressers and lamps Line from Schedule A/B: 6.1	\$1,150.00		\$1,150.00  100% of fair market value, up to any applicable statutory limit	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4)	
Televisions x2 and cell phones Line from Schedule A/B: 7.1	\$800.00	<b>■</b>	\$800.00  100% of fair market value, up to any applicable statutory limit	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4)	
All mens and ladies clothing Line from Schedule A/B: 11.1	\$500.00	<b>•</b>	\$50.00  100% of fair market value, up to any applicable statutory limit	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4)	
All mens and ladies clothing Line from Schedule A/B: 11.1	\$500.00	<b>•</b>	\$450.00  100% of fair market value, up to any applicable statutory limit	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)	

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Debtor Debtor		andy Lynn Smith			Case number (if known)		
		ription of the property and line on A/B that lists this property	Current value of the Amount of the exemption you claim portion you own			Specific laws that allow exemption	
			Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
		g rings and watches Schedule A/B: <b>12.1</b>	\$550.00		\$550.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)	
	10 11 0111	Ganedale 772. 1=11			100% of fair market value, up to any applicable statutory limit		
	ash	Schedule A/B: <b>16.1</b>	\$25.00		\$25.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)	
LIII	ie iroini	Scriedule AVD. 10.1			100% of fair market value, up to any applicable statutory limit	1100. 3 11-30-(0)(3)	
		g: M&T Bank, checking	\$680.00		\$680.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)	
Br xx	account in name of Christopher and Brandy Smith, account no xxxx-xx-9995 - balance in account Line from Schedule A/B: 17.1				100% of fair market value, up to any applicable statutory limit	1100. 3 11-304(0)(3)	
		rnich, 3420 Nova Scotia berdeen, MD 21001 - security	\$1,600.00		\$1,600.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)	
de	posit	Schedule A/B: 22.1			100% of fair market value, up to any applicable statutory limit	F100. 3 11-304(b)(3)	
		and state: State of Maryland	\$580.00		\$580.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)	
		Schedule A/B: <b>28.1</b>			100% of fair market value, up to any applicable statutory limit	F100. 9 11-304(b)(3)	
	ne wee	eks wages for Christopher	\$1,400.00		\$1,400.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)	
•		Schedule A/B: 30.1			100% of fair market value, up to any applicable statutory limit	1100. 3 11 00-(0)(0)	
	Are you claiming a homestead exemption of more than \$160,37 Subject to adjustment on 4/01/19 and every 3 years after that for ca				led on or after the date of adjustmen	nt.)	
_	Yes.	Did you acquire the property covere	ed by the exemption w	ithin 1	,215 days before you filed this case?	?	
	□ No						
		Yes					

	e 19-14249 DOC 1 Filed 03/2	9/19 Page 17		
Fill in this information to identify you	r case:			
Debtor 1 Christopher The	omas Smith			
First Name	Middle Name Last Name			
Debtor 2 Brandy Lynn Si				
(Spouse if, filing) First Name	Middle Name Last Name			
United States Bankruptcy Court for the	DISTRICT OF MARYLAND			
Case number				
(if known)			☐ Check	if this is an
			ameno	ded filing
Official Form 100D				
Official Form 106D				
Schedule D: Creditors	Who Have Claims Secure	d by Property	y	12/15
	If two married people are filing together, both are e			
is needed, copy the Additional Page, fill it number (if known).	out, number the entries, and attach it to this form. C	n the top of any addition	nal pages, write your na	me and case
1. Do any creditors have claims secured by	your property?			
☐ No. Check this box and submit t	his form to the court with your other schedules. Y	ou have nothing else to	report on this form.	
■ Yes. Fill in all of the information	below.			
Part 1: List All Secured Claims				
		Column A	Column B	Column C
	more than one secured claim, list the creditor separatel a particular claim, list the other creditors in Part 2. As	/ Amount of claim	Value of collateral	Unsecured
much as possible, list the claims in alphabeti	cal order according to the creditor's name.	Do not deduct the value of collateral.	that supports this	portion
2.1 APGFCU	Describe the property that secures the claim:	\$45,000.00	s50,000.00	If any <b>\$0.00</b>
Creditor's Name	A 2019 Ram 1500 crew cab with			
	mileage of 4000			
DO D. 4470	As of the date you file, the claim is: Check all that			
PO Box 1176 Aberdeen, MD 21001	apply.			
<u> </u>	Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.			
_	_			
Debtor 1 only	An agreement you made (such as mortgage or se car loan)	curea		
Debtor 2 only	,			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number 7378			
Add the dollar value of your entries in C	olumn A on this page. Write that number here:	\$45,00	0.00	
If this is the last page of your form, add		\$45,00		
Write that number here:		Ψ-13,00	0.00	

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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Fill in this infor	mation to identify your case:		-				
		tal.					
Debtor 1	Christopher Thomas Sm First Name Mi	ith iddle Name Last Name					
Debtor 2	Brandy Lynn Smith	Last Name					
(Spouse if, filing)		iddle Name Last Name					
United States Ba	ankruptcy Court for the: DISTR	ICT OF MARYLAND					
Case number							
(if known)					Check	if this is a	n
					amend	ed filing	
Official For						40/4	_
Schedule I	=/F: Creditors Who Ha	ave Unsecured Claims				12/1	<u>5                                    </u>
left. Attach the Co name and case nu	ntinuation Page to this page. If you I	Property. If more space is needed, copy the Pal have no information to report in a Part, do not I Claims					
	tors have priority unsecured claims						
☐ No. Go to	• •	,					
Yes.							
identify what to possible, list the	ype of claim it is. If a claim has both pri-	ditor has more than one priority unsecured claim, lority and nonpriority amounts, list that claim here no to the creditor's name. If you have more than to aim, list the other creditors in Part 3.	and show both priority a	ind nonpriori	ty amount	s. As much	n as
(For an explar	nation of each type of claim, see the ins	structions for this form in the instruction booklet.)	Total claim	Priority amount		Nonprior amount	ity
2.1 Compt	roller of Maryland	Last 4 digits of account number	\$0.00		\$0.00		\$0.00
,	reditor's Name		<u> </u>				
	ue Administration Division	When was the debt incurred?		-			
PO Bo	x 2601 olis, MD 21404						
	Street City State Zip Code	As of the date you file, the claim is: Check	all that apply				
Who incurre	ed the debt? Check one.	☐ Contingent					
Debtor 1	only	☐ Unliquidated					
Debtor 2	only	☐ Disputed					
■ Debtor 1	and Debtor 2 only	Type of PRIORITY unsecured claim:					
_	one of the debtors and another	☐ Domestic support obligations					
_	this claim is for a community debt	Taxes and certain other debts you owe the	e government				
	subject to offset?	☐ Claims for death or personal injury while y					
■ No	•	Other. Specify					
☐ Yes		опот. ороопу					

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	Christopher Thomas Smith Brandy Lynn Smith	Case number (if known)	
2.2	Internal Revenue Service Priority Creditor's Name	Last 4 digits of account number\$0.00	\$0.00
	Phonty Creditor's Name	When was the debt incurred?	
	Cincinnati, OH 45999		
14	Number Street City State Zip Code  /ho incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
_	Debtor 1 only	Contingent	
_	_	☐ Unliquidated	
	Debtor 2 only	☐ Disputed	
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Domestic support obligations	
	Check if this claim is for a community debt	Taxes and certain other debts you owe the government	
Is	the claim subject to offset?	☐ Claims for death or personal injury while you were intoxicated	
	No	Other. Specify	
	] Yes		
3. Do	any creditors have nonpriority unsecured claim  No. You have nothing to report in this part. Submit to	s against you?	
uns tha	secured claim, list the creditor separately for each claim	alphabetical order of the creditor who holds each claim. If a creditor has more that aim. For each claim listed, identify what type of claim it is. Do not list claims already incoreditors in Part 3.If you have more than three nonpriority unsecured claims fill out the	cluded in Part 1. If more
			Total claim
4.1	Amerimark Premier	Last 4 digits of account number 6404	\$215.65
	Nonpriority Creditor's Name PO Box 2845 Monroe, WI 53566	When was the debt incurred?	-
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	lacksquare Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit card purchases	_

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		A
Capital One Nonpriority Creditor's Name	Last 4 digits of account number 5507	\$898.82
PO Box 71083	When was the debt incurred?	
Charlotte, NC 28272  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	,	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
lebt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	□ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Credit card purchases	
Capital One Nonpriority Creditor's Name	Last 4 digits of account number 2347	\$843.87
PO Box 71083	When was the debt incurred?	
Charlotte, NC 28272		
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only		
_	Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
lebt s the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
⊒ Yes	■ Other. Specify Credit card purchases	
1100	Other: Specify	
Card Services	Last 4 digits of account number 2438	\$3,987.86
Nonpriority Creditor's Name PO Box 84064 Columbus, GA 31908	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
Debtor 1 only	☐ Contingent	
Debtor 2 only	□ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims  ☐ Debts to pension or profit-sharing plans, and other similar debts	
No		
☐ Yes	■ Other. Specify Credit card purchases	

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	r 1 Christopher Thomas Smith T 2 Brandy Lynn Smith		Case number (if known)	
4.5	Carol Wright Gifts	Last 4 digits of account number	64A4	\$175.69
	Nonpriority Creditor's Name PO Box 2852	When was the debt incurred?		
	Monroe, WI 53566  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit card	purchases	
4.6	CBCS	Last 4 digits of account number	1005	\$0.00
	Nonpriority Creditor's Name		Representing HSN	
	PO Box 163279 Columbus, OH 43216-3279	When was the debt incurred?	Improvements	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure  ☐ Student loans		
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a sepa		
	Is the claim subject to offset?	report as priority claims	tration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Notice only	<u> </u>	
4.7	ccs	Last 4 digits of account number		\$0.00
	Nonpriority Creditor's Name Payment Processing Center PO Box 55126 Boston, MA 02205-5126	When was the debt incurred?	Representing Sequenom Molecular Medicine LLC	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharir	g plans, and other similar debts	
	Yes	■ Other Specify Notice only	,	
		- Other Opcomy		

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1 Christopher Thomas Smith 2 Brandy Lynn Smith	Case number (if known)				
Comenity - Venus	Last 4 digits of account number 4952	\$1,504.8			
Nonpriority Creditor's Name PO Box 659617 San Antonio, TX 78265	When was the debt incurred?	<u> </u>			
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
☐ Debtor 1 only	☐ Contingent				
■ Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts				
Yes	■ Other. Specify Credit card purchases				
Comenity Bank - Jessica London Nonpriority Creditor's Name	Last 4 digits of account number 8740	\$319.9			
PO Box 659728 San Antonio, TX 78265	When was the debt incurred?				
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
Debtor 1 only	☐ Contingent				
■ Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
No	Debts to pension or profit-sharing plans, and other similar debts				
Yes	■ Other. Specify Credit card purchases				
Comenity Capital Bank/JD Williams	Last 4 digits of account number 1324	\$364.28			
Nonpriority Creditor's Name PO Box 659707 San Antonio, TX 78265	When was the debt incurred?				
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
Debtor 1 only	☐ Contingent				
■ Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
No	lacksquare Debts to pension or profit-sharing plans, and other similar debts				
☐ Yes	■ Other. Specify Credit card purchases				

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	or 1 Christopher Thomas Smith or 2 Brandy Lynn Smith	Case number (if known)	
4.1 1	Comenity-Bryland Home	Last 4 digits of account number 3308	\$320.29
	Nonpriority Creditor's Name PO Box 659728 San Antonio, TX 78265	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit card purchases	
4.1	Comenity/Capital One Bank/Improvements Nonpriority Creditor's Name	Last 4 digits of account number	\$1,178.38
	PO Box 659707 San Antonio, TX 78265	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify	
4.1	Country Door	Last 4 digits of account number 2530	\$777.30
	Nonpriority Creditor's Name 1112 7th Avenue Monroe, WI 53566	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit card purchases	

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T 1 Christopher Thomas Smith  Brandy Lynn Smith	Case number (if known)	
Credit One Bank	Last 4 digits of account number XXXX	\$1,130.00
Nonpriority Creditor's Name		
PO Box 98872 Las Vegas, NV 89193	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Credit card purchases	
Credit One Bank	Last 4 digits of account number XXXX	\$1,115.0
Nonpriority Creditor's Name PO Box 98872	When was the debt incurred?	
Las Vegas, NV 89193	Mien was the debt incurred:	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Credit card purchases	
Direct Charge	Last 4 digits of account number 2120	\$249.7
Nonpriority Creditor's Name 1112 7th Avenue	When was the debt incurred?	
Monroe, WI 53566  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
☐ Debtor 1 only	☐ Contingent	
■ Debtor 2 only	□ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other. Specify Credit card purchases	

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	1 Christopher Thomas Smith 2 Brandy Lynn Smith		Case number (if known)	
4.1	Encore Receivable Management, Inc.	Last 4 digits of account number		\$0.00
	Nonpriority Creditor's Name	_		
	400 N. Rogers Rd.	When was the debt incurred?		
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sep report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-shari	ng plans, and other similar debts	
	Yes	Other. Specify		
4.1	Encore Receivable Management, Inc.	Last 4 digits of account number		\$0.00
	Nonpriority Creditor's Name 400 N. Rogers Rd. PO Box 3330 Olathe, KS 66063	When was the debt incurred?	Representing Synchrony/Mattress Firm	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sep report as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-shari	ng plans, and other similar debts	
	Yes	Other. Specify Notice only	у	
4.1	Figis Gallery Home & Gifts Nonpriority Creditor's Name	Last 4 digits of account number	60D2	\$341.93
	PO Box 77001 Madison, WI 53707	When was the debt incurred?		
•	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	□ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sep report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-shari	ng plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit card	d purchases - 3 accounts	
		·		

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Brandy Lynn Smith		
First Premier Bank	Last 4 digits of account number 0287	\$874.34
Nonpriority Creditor's Name PO Box 5529	When was the debt incurred?	
Sioux Falls, SD 57117  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
□Yes	Other. Specify Credit card purchases	
First Premier Bank	Last 4 digits of account number 1276	\$419.29
Nonpriority Creditor's Name PO Box 5529	When was the debt incurred?	
Sioux Falls, SD 57117  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Oneok an that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Credit card purchases	
K. Jordan	Last 4 digits of account number 78B2	\$960.56
Nonpriority Creditor's Name	<del></del>	
PO Box 2809 Monroe, WI 53566	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:  ☐ Student loans	
☐ Check if this claim is for a community debt sthe claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other Specify Credit card purchases	

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Brandy Lynn Smith	Case number (if known)	
Masseys	Last 4 digits of account number 78AZ	\$568.97
Nonpriority Creditor's Name PO Box 2822	When was the debt incurred?	
Monroe, WI 53566		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Credit card purchases	
Mercury Card/FB&T	Last 4 digits of account number XXXX	\$3,087.00
Nonpriority Creditor's Name		<b>,</b> -,
PO Box 84064 Columbus, GA 31908	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	• • • • • • • • • • • • • • • • • • • •	
☐ Debtor 1 only	☐ Contingent	
■ Debtor 2 only	□ Unliquidated	
☐ Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Credit card purchases	
Midnight Velvet	Last 4 digits of account number 2550	\$516.15
Nonpriority Creditor's Name	<del></del>	
1112 7th Avenue	When was the debt incurred?	
Monroe, WI 53566  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the dami is. Officer all that apply	
Debtor 1 only	☐ Contingent	
■ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
_	☐ Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Credit card purchases	

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	or 1 Christopher Thomas Smith Brandy Lynn Smith	Case number (if known)	
4.2 6	Miles Kimball	Last 4 digits of account number 8207	\$519.14
	Nonpriority Creditor's Name PO Box 2860	When was the debt incurred?	
	Monroe, WI 53566  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit card purchases	
4.2 7	Monroe and Main	Last 4 digits of account number 2110	\$567.62
	Nonpriority Creditor's Name 1112 7th Avenue	When was the debt incurred?	
	Monroe, WI 53566  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit card purchases	
4.2	Montgomery Ward	Last 4 digits of account number 2290	\$759.18
0	Nonpriority Creditor's Name 1112 7th Avenue	When was the debt incurred?	<u> </u>
	Monroe, WI 53566	As of the date was file the claim in Oberland all that south	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	$\square$ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims  ☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit card purchases	

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North Shore Agency ND4	Last 4 digits of account number 9284	\$65.14
Nonpriority Creditor's Name	Last 4 digits of account fulliber	400
PO Box 9205	When was the debt incurred?	
Old Bethpage, NY 11804  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the diam is. Oncok an that apply	
☐ Debtor 1 only	☐ Contingent	
■ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other Specify Credit card purchases	
PayPal Credit	Last 4 digits of account number 7356	\$3,035.69
Nonpriority Creditor's Name	Last 4 digits of account number 7356	φ3,033.0
PO Box 71202 Charlotte, NC 28272	When was the debt incurred?	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Credit card purchases	
PayPal Credit	Last 4 digits of account number 0236	\$2,103.9
Nonpriority Creditor's Name		,,
PO Box 71202	When was the debt incurred?	
Charlotte, NC 28272  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the dam is. Oneok an that appry	
☐ Debtor 1 only	☐ Contingent	
■ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other Specify Credit card purchases	

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Roaman's	Last 4 digits of account number 8939	\$499.71
Nonpriority Creditor's Name PO Box 659728	When was the debt incurred?	
San Antonio, TX 78265  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
■ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Credit card purchases	
Seventh Avenue	Last 4 digits of account number 2570	\$1,688.6
Nonpriority Creditor's Name 1112 7th Avenue	When was the debt incurred?	. ,
Monroe, WI 53566  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Oneon an that apply	
Debtor 1 only	☐ Contingent	
■ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Credit card purchases	
Stoneberry	Last 4 digits of account number 71C2	\$758.4
Nonpriority Creditor's Name PO Box 2820	When was the debt incurred?	• • • •
Monroe, WI 53566		
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Credit card purchases	

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Synchrony Bank/AEO, Inc.	Last 4 digits of account number 1731	\$592.2
Nonpriority Creditor's Name PO Box 530942 Atlanta. GA 30353	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Credit card purchases	
Synchrony Bank/Amazon	Last 4 digits of account number 1246	\$928.75
Nonpriority Creditor's Name PO Box 960013	When was the debt incurred?	
Orlando, FL 32896 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Oneck an that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Credit card purchases	
Synchrony Bank/Mattress Firm	Last 4 digits of account number 7998	\$1.772.48
Nonpriority Creditor's Name		. · <b>,</b>
c/o Mattress Firm In Store/SYNCHB PO Box 960061	When was the debt incurred?	
Orlando, FL 32896 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
■ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Credit card purchases	

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Synchrony Bank/Walmart	Last 4 digits of account number	7706	\$1,154.22
Nonpriority Creditor's Name PO Box 530927	When was the debt incurred?		
Atlanta, GA 30353  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
$\square$ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
□Yes	Other. Specify Credit card	purchases	
Transworld Systems Nonpriority Creditor's Name	Last 4 digits of account number	9031	\$0.00
PO Box 15273 Wilmington, DE 19850	When was the debt incurred?	Representing Greater Baltimore Medical Center	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify Notice only	- multiple medical bills	
Webbank/Fingerhut	Last 4 digits of account number	0933	\$461.96
Nonpriority Creditor's Name PO Box 70281	When was the debt incurred?		
Philadelphia, PA 19176  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	Пол		
Debtor 2 only	☐ Contingent		
Debtor 2 only  Debtor 1 and Debtor 2 only	☐ Unliquidated		
	☐ Disputed  Type of NONPRIORITY unsecured	claim:	
At least one of the debtors and another	Student loans		
☐ Check if this claim is for a community debt s the claim subject to offset?		ration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
⊒ Yes	■ Other. Specify Credit card		

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	or 1 Christopher Thomas Smith or 2 Brandy Lynn Smith	Case number (if known)	
4.4 1	Wells Fargo Bank NA	Last 4 digits of account number 5051	\$3,399.82
	Nonpriority Creditor's Name PO Box 71118 Charlotte, NC 28272	When was the debt incurred?	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit card purchases	
4.4 2	Wells Fargo Card Services	Last 4 digits of account number 1632	\$7,034.66
	Nonpriority Creditor's Name PO Box 77053 Minneapolis, MN 55480	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	$\square$ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit card purchases	
4.4	Wells Fargo Card Services	Last 4 digits of account number 4143	\$2,094.00
	Nonpriority Creditor's Name PO Box 77053	When was the debt incurred?	
	Minneapolis, MN 55480-7753  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify Credit card purchases	
		Suitor. Opooliy	

#### Part 3: List Others to Be Notified About a Debt That You Already Listed

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1	Christopher Thomas Smith	
Debtor 2	Brandy Lynn Smith	Case number (if known)

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 47,285.58
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 47,285.58

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Fill in this inform							
Debtor 1	Christopher Thor						
	First Name	Middle Name	Last Name				
Debtor 2	Brandy Lynn Smith						
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Bar	nkruptcy Court for the:	DISTRICT OF MARYLAI	ND				
Case number					☐ Check if this is an amended filing		

### Official Form 106G

### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

State what the contract or lease is for

2.1 NMAC PO Box 660577 Dallas, TX 75266 A 2018 Infiniti QRS with mileage of 12,100

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Fill in this	information to identify yo	ur case:		
Debtor 1	Christopher Th			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filin	Brandy Lynn S First Name	mith Middle Name	Last Name	
	es Bankruptcy Court for the			
Case numb	per			
(if known)				☐ Check if this is an
				amended filing
Official	Form 106H			
Sched	ule H: Your Co	debtors		12/15
1. Do y	and case number (if know you have any codebtors?	,	on. e, do not list either spouse a	s a codebtor.
■ No □ Yes				
			property state or territory Puerto Rico, Texas, Washin	? (Community property states and territories include gton, and Wisconsin.)
	Go to line 3.  Did your spouse, former s	pouse, or legal equivalent	ive with you at the time?	
in line Form 1	2 again as a codebtor onl	y if that person is a guar	antor or cosigner. Make s	f your spouse is filing with you. List the person shown ure you have listed the creditor on Schedule D (Official G). Use Schedule D, Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State an	d ZIP Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1				☐ Schedule D, line
	Name			☐ Schedule E/F, line
				☐ Schedule G, line
	Number Street City	State	ZIP Code	
3.2				☐ Schedule D, line
	Name			☐ Schedule E/F, line
				☐ Schedule G, line
	Number Street			
(	City	State	ZIP Code	

Fill in this informa	tion to identify your case:	
Debtor 1	Christopher Thomas Smith	
Debtor 2 (Spouse, if filing)	Brandy Lynn Smith	
United States Bar	nkruptcy Court for the: DISTRICT OF MARYLAND	
Case number (If known)		Check if this is:  ☐ An amended filing ☐ A supplement showing postpetition chapter
Official Fo		13 income as of the following date:  MM / DD/ YYYY
Schedule	I: Your Income	12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Describe Employment** Fill in your employment **Debtor 1** Debtor 2 or non-filing spouse information. ■ Employed If you have more than one job, Employed **Employment status** attach a separate page with Not employed ■ Not employed information about additional employers. Occupation **Foreman** Include part-time, seasonal, or **Employer's name** A Plus Remodeling self-employed work. **Employer's address** Occupation may include student 10509 Stan Court or homemaker, if it applies. White Marsh, MD 21162 How long employed there? 9 years 11 months

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. **List monthly gross wages, salary, and commissions** (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

**Give Details About Monthly Income** 

- 3. Estimate and list monthly overtime pay.
- 4. Calculate gross Income. Add line 2 + line 3.

2. \$ 5,600.00 \$ 0.00
3. +\$ 0.00 +\$ 0.00
4. \$ 5,600.00 \$ 0.00

For Debtor 1

For Debtor 2 or

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Debi	tor 1 tor 2	Christopher Th Brandy Lynn S			Case n	umber ( <i>if known</i> )			
						Debtor 1	non	Debtor 2 or -filing spouse	
	Cop	y line 4 here		4.	\$	5,600.00	_	0.00	
5.	List	all payroll deduct	tions:						
-	5a.		and Social Security deductions	5a.	\$	0.00	\$	0.00	
	5b.	, ,	ributions for retirement plans	5a. 5b.	\$	0.00		0.00	
	5c.	•	ibutions for retirement plans	5c.	\$	0.00	- '—	0.00	
	5d.		ments of retirement fund loans	5d.	\$-	0.00	—	0.00	
	5e.	Insurance	ments of retirement fund todals	5e.	\$	0.00	- '—	0.00	
	5f.	Domestic suppo	ort obligations	5f.	\$	0.00	—	0.00	
	5g.	Union dues	ort obligations	5g.	\$-	0.00		0.00	
	5h.	Other deduction	ns. Specify:	5h.⊣	- :	0.00		0.00	
6.			ctions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	* *	0.00	- · · · — - · · \$	0.00	
			· ·		· —		- '		
7.	Cai	culate total month	ly take-home pay. Subtract line 6 from line 4.	7.	\$	5,600.00	- \$_	0.00	
8.	List 8a.	Net income from profession, or fa Attach a stateme	ent for each property and business showing gross y and necessary business expenses, and the total	8a.	\$	0.00	\$	0.00	
	8b.	Interest and div		8b.	\$	0.00		0.00	
	8c.	Family support regularly receiv Include alimony,	payments that you, a non-filing spouse, or a depen		\$	0.00	- '	0.00	
	8d.	Unemployment	compensation	8d.	\$	0.00	\$	0.00	
	8e.	Social Security		8e.	\$	0.00	\$	0.00	
	8f. 8g.	Include cash ass that you receive,	ent assistance that you regularly receive sistance and the value (if known) of any non-cash assist such as food stamps (benefits under the Supplementance Program) or housing subsidies.		\$ \$	0.00	-	0.00 0.00	
	8h.	Other monthly i	ncome. Specify:	8h.+	+ \$	0.00		0.00	
							1 —		7
9.	Add	l all other income.	Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$_	0.00	
10.	Cal	culate monthly inc	come. Add line 7 + line 9.	10. \$	5	,600.00 + \$		0.00 = \$	5,600.00
	Add	the entries in line 1	10 for Debtor 1 and Debtor 2 or non-filing spouse.			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
11.	othe Do	ude contributions fro er friends or relative	r contributions to the expenses that you list in Sche om an unmarried partner, members of your household, is. bunts already included in lines 2-10 or amounts that are	your depen		•		Schedule J. 11. +\$	0.00
12.		e that amount on th	e last column of line 10 to the amount in line 11. The Summary of Schedules and Statistical Summary of C						5,600.00
13.	Do :	you expect an inci No.	rease or decrease within the year after you file this	form?					income
		Yes. Explain:							

Official Form 106I Schedule I: Your Income page 2

Fill	in this informa	ation to identify yo	our case.			ı		
	otor 1	Christopher		Smith		Chec	k if this is:	
DCD	NOT 1	Christopher	HIOHIAS	Silitii		☐ An amended filing		
	otor 2 ouse, if filing)	Brandy Lynn	Smith					ving postpetition chapter the following date:
Unit	ed States Bankr	ruptcy Court for the	: DISTRI	CT OF MARYLAND		1	MM / DD / YYYY	
	e number nown)							
Of	fficial Fo	rm 106J				-		
S	chedule	J: Your l	Exper	ises				12/1
info	ormation. If m		eded, atta	If two married people ar ch another sheet to this n.				
Par	t 1: Descr	ribe Your House	hold					
1.	Is this a joir							
	□ No. Go to			ata haysahaldO				
		es Debtor 2 live i	ın a separ	ate nousenoid?				
	■ N □ Y		st file Offici	al Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of Debt	or 2.	
2.	Do you have	e dependents?	□ No					
	Do not list D Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state dependents				Daughter		4	□ No ■ Yes
					Son		18	□ No ■ Yes
								□ No □ Yes
								□ No
3.	expenses o	oenses include f people other tl d your depende	han $_{m \Box}$	No Yes				☐ Yes
Par	t 2: Estim	ate Your Ongoi	ng Monthi	y Expenses				
exp	imate your ex	xpenses as of yo	our bankr	uptcy filing date unless y y is filed. If this is a supp				
the	value of sucl	h assistance and		government assistance i			Your exp	oneae
(On	ficial Form 10	וטו.)					Tour exp	
4.		or home owners and any rent for the		ses for your residence. I r lot.	nclude first mortgag	e 4. \$		1,600.00
	If not includ	ded in line 4:						
	4a. Real e	estate taxes				4a. \$		0.00
		rty, homeowner's				4b. \$		0.00
		maintenance, re owner's associat		ipkeep expenses		4c. \$ 4d. \$		0.00
5.				oominium dues our residence, such as ho	me equity loans	4d. \$ 5. \$		0.00

Debtor 1 Debtor 2	Christopher Thomas Smith Brandy Lynn Smith	Case num	ber (if known)	
6. Utiliti	es:			
6a.	Electricity, heat, natural gas	6a.	\$	250.00
6b.	Water, sewer, garbage collection	6b.	\$	100.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	505.00
6d.	Other. Specify:	6d.	\$	0.00
7. Food	and housekeeping supplies		\$	1,000.00
8. Child	care and children's education costs	8.	\$	300.00
9. Cloth	ing, laundry, and dry cleaning	9.	\$	100.00
	onal care products and services	10.	\$	100.00
	cal and dental expenses	11.	\$	0.00
	sportation. Include gas, maintenance, bus or train fare.	12.	\$	700.00
	tainment, clubs, recreation, newspapers, magazines, and books	13.	\$	400.00
	table contributions and religious donations	14.	*	0.00
15. <b>Insu</b> r	•			0.00
-	t include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	0.00
15b.	Health insurance	15b.	\$	0.00
15c.	Vehicle insurance	15c.	\$	300.00
15d.	Other insurance. Specify: Renters insurance	15d.	\$	15.00
6. <b>Taxe</b>	s. Do not include taxes deducted from your pay or included in lines 4 or 20.		\$	
	fy: Income tax deposits	16.	Φ	600.00
	Iment or lease payments: Car payments for Vehicle 1	17a.	¢	658.00
	Car payments for Vehicle 2	17a. 17b.	·	536.00
	• •	17b. 17c.	*	
	Other Specify:			0.00
	Other. Specify:	17d.	Ф	0.00
	payments of alimony, maintenance, and support that you did not report as cted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
	payments you make to support others who do not live with you.		\$	0.00
Spec		19.		0.00
	real property expenses not included in lines 4 or 5 of this form or on Sched		our Income.	
	Mortgages on other property	20a.		0.00
20b.	Real estate taxes	20b.	\$	0.00
20c.	Property, homeowner's, or renter's insurance	20c.	\$	0.00
20d.	Maintenance, repair, and upkeep expenses	20d.	·	0.00
	Homeowner's association or condominium dues	20e.	·	0.00
	: Specify:		+\$	0.00
				0.00
	late your monthly expenses			
	Add lines 4 through 21.		\$	7,164.00
22b. (	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c. /	Add line 22a and 22b. The result is your monthly expenses.		\$	7,164.00
3. Calcu	late your monthly net income.			
23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	5,600.00
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	7,164.00
23c.	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	-1,564.00
For ex				or decrease because of a
<b>□</b> Y6	5. Expiain note.			

Fill in this infor	mation to identify your	case:			
Debtor 1	Christopher Thor	nas Smith			
	First Name	Middle Name	Last Name		
Debtor 2	Brandy Lynn Smi				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF MARYLA	ND		
Case number					
(if known)				☐ Ch	eck if this is an
				am	ended filing
Official Forr	m 106Dec				
Declarat	tion About a	n Individual	<b>Debtor's Sched</b>	ules	12/15
obtaining mone		n connection with a bank	or amended schedules. Making ruptcy case can result in fines t		
Sig	ın Below				
Sig	III Delow				
Did you pa	ay or agree to pay some	one who is NOT an attor	ney to help you fill out bankrupt	ccy forms?	
■ No					
☐ Yes. I	Name of person			Attach Bankruptcy Petition	n Preparer's Notice.
_	•			<ul> <li>Declaration, and Signature</li> </ul>	e (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sum	mary and schedules filed with th	nis declaration and	
·		si4h.	V /a/ Brandy Lymp C	·mith	
	ristopher Thomas Sn opher Thomas Smith		X /s/ Brandy Lynn S Brandy Lynn Smit		
	ire of Debtor 1		Signature of Debtor 2		
Date	March 29, 2019		Date March 29, 2	2019	

	4					
		nation to identify you				
Debto	r 1	Christopher Tho	omas Smith  Middle Name	Last Name		
Debto	r 2	Brandy Lynn Sm		Last Hamo		
	if, filing)	First Name	Middle Name	Last Name		
United	d States Ba	nkruptcy Court for the:	DISTRICT OF MARYLAN	ID		
Case (if known	number _				_	heck if this is an mended filing
Stat	ement	ınd accurate as possi		are filing together, both are	ankruptcy equally responsible for sup	
numbe	er (if know	n). Answer every ques	stion.	·	, adamona, pages,e yea	
<b>Part 1</b> 1. W		r current marital statu	nrital Status and Where You is?	Lived Before		
<b>■</b>	Married					
2. D	uring the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	No Yes. Lis	t all of the places you I	ived in the last 3 years. Do no	ot include where you live now	<i>ı</i> .	
C	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	dress:	Dates Debtor 2 lived there
					ity property state or territory ico, Texas, Washington and W	
	No Yes. Ma	ike sure you fill out <i>Scl</i>	nedule H: Your Codebtors (Of	fficial Form 106H).		
Part 2	Explai	n the Sources of You	r Income			
Fi	Il in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part		ndar years?
	No Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$7,000.00	☐ Wages, commissions, bonuses, tips	\$0.00
			☐ Operating a business		☐ Operating a business	

Official Form 107

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	Christopher Brandy Lynr	Thomas Smith		Cas	e number (if known)		
		Del	otor 1		Dobtos 2		
		Sou	rces of income eck all that apply.	Gross income (before deductions and exclusions)	Sources of inco		Gross income (before deductions and exclusions)
	For last calendar year: (January 1 to December 31, 2018)		Nages, commissions, uses, tips	\$29,641.00	☐ Wages, comr bonuses, tips	missions,	\$0.00
			Operating a business		☐ Operating a b	ousiness	
For the calendar year before that: (January 1 to December 31, 2017)		31 2017 \	Nages, commissions, uses, tips	\$24,428.00	☐ Wages, comr bonuses, tips	missions,	\$0.00
			Operating a business		☐ Operating a b	ousiness	
List each	h source and t	the gross income fr	om each source separat	rou received together, list it c	hat you listed in line		
			tor 1		Debtor 2		
			rces of income cribe below.	Gross income from each source (before deductions and exclusions)	Sources of inco Describe below.	ome	Gross income (before deductions and exclusions)
Part 3: Li	ist Certain Pa	yments You Made	e Before You Filed for I	Bankruptcy			
□ No	During the No. Yes  * Subject	ebtor 1 nor Debto primarily for a perso 90 days before yo Go to line 7. List below each of paid that creditor not include paym to adjustment on 4	onal, family, or househol u filed for bankruptcy, die creditor to whom you paid . Do not include payment ents to an attorney for the /01/19 and every 3 years	d you pay any creditor a total d a total of \$6,425* or more its for domestic support oblighis bankruptcy case.	I of \$6,425* or more in one or more payi gations, such as chi	e? ments and t ld support a	he total amount you and alimony. Also, do
■ Ye			h have primarily consu u filed for bankruptcy, die	mer debts. d you pay any creditor a tota	I of \$600 or more?		
	■ No. □ Yes		s for domestic support of	d a total of \$600 or more and oligations, such as child supp			
Credito	or's Name and	d Address	Dates of payme	nt Total amount paid	Amount you still owe	Was this	payment for

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	otor 1 otor 2	Brandy Lynn Smith		Cas	se number (if known		
7.	Inside of wh	in 1 year before you filed for bankruptoers include your relatives; any general paich you are an officer, director, person in iness you operate as a sole proprietor. 1 ny.	artners; relatives of any gene control, or owner of 20% or	eral partners; partner r more of their voting	erships of which y g securities; and a	ou are a genera any managing a	ll partner; corporations gent, including one for
	_	No Yes. List all payments to an insider.					
	Insid	der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	insid	in 1 year before you filed for bankruptoer? de payments on debts guaranteed or cos		•	any property on a	account of a de	ebt that benefited an
	_	No					
		Yes. List all payments to an insider der's Name and Address	Dates of payment	Total amount	Amount you	Reason for	this payment
			, ,	paid	still owe	Include cred	
Pai	t 4:	Identify Legal Actions, Repossession	ns, and Foreclosures				_
9.	List a modif	in 1 year before you filed for bankrupto Il such matters, including personal injury ications, and contract disputes.  No Yes. Fill in the details.					
	Case	e title e number	Nature of the case	Court or agency		Status of th	e case
10.		in 1 year before you filed for bankrupto k all that apply and fill in the details below		rty repossessed, f	oreclosed, garni	shed, attached	l, seized, or levied?
	_	No. Go to line 11. Yes. Fill in the information below.					
	Cred	ditor Name and Address	Describe the Property		Date		Value of the
			Explain what happened				property
11.	acco	n 90 days before you filed for bankrup unts or refuse to make a payment bec No		uding a bank or fir	nancial institutio	n, set off any a	mounts from your
		Yes. Fill in the details.	Decaribe the action the	ana ditanta al-	Dete		Amazont
	Cred	litor Name and Address	Describe the action the	creditor took	take	action was	Amount
12.		n 1 year before you filed for bankrupt -appointed receiver, a custodian, or a		rty in the possess	ion of an assign	ee for the bene	fit of creditors, a
	_	No					
		Yes					
Pai	t 5:	List Certain Gifts and Contributions					
13.	_	i <mark>n 2 years before you filed for bankrup</mark> No	tcy, did you give any gifts	with a total value	of more than \$6	00 per person?	•
		Yes. Fill in the details for each gift.	Describe the wife		Dete		Value
		s with a total value of more than \$600 person	Describe the gifts		Date the (	s you gave gifts	Value
		son to Whom You Gave the Gift and ress:					

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	otor 1 otor 2	Christopher Thomas Smith Brandy Lynn Smith			Case numbe	「 (if known)	
14.		n 2 years before you filed for bank No Yes. Fill in the details for each gift or		, did you give any gifts or contribut	ions with a tot	al value of more than	\$600 to any charity?
	Gifts more Char	or contributions to charities that e than \$600 rity's Name ress (Number, Street, City, State and ZIP Co	total	Describe what you contributed		Dates you contributed	Value
Par	t 6:	List Certain Losses					
15.		n 1 year before you filed for bankr mbling?	uptcy o	or since you filed for bankruptcy, di	d you lose any	ything because of the	ft, fire, other disaster,
	_	No Yes. Fill in the details.					
		cribe the property you lost and the loss occurred	Includ	ribe any insurance coverage for the de the amount that insurance has paid ance claims on line 33 of Schedule A	d. List pending	Date of your loss	Value of property lost
Par	t 7:	List Certain Payments or Transfe	rs				
16.	Includ	ulted about seeking bankruptcy o	r prepar	did you or anyone else acting on yoring a bankruptcy petition? ers, or credit counseling agencies for			rty to anyone you
	Pers Addi Ema	on Who Was Paid	You	Description and value of any pr transferred	operty	Date payment or transfer was made	Amount of payment
	102	our W. Bolton S. Parke Street rdeen, MD 21001				March 5, 2019	\$1,500.00
	Alle	n Credit & Debt Counseling					\$25.00
17.	prom		editors	did you or anyone else acting on yo or to make payments to your credi sted on line 16.		or transfer any prope	rty to anyone who
	_	No Yes. Fill in the details.					
	Pers Addi	on Who Was Paid ress		Description and value of any pr transferred	operty	Date payment or transfer was made	Amount of payment
18.	transi Includi includ	ferred in the ordinary course of you le both outright transfers and transfe le gifts and transfers that you have a	our busi	e as security (such as the granting of a			
	_	No Yes. Fill in the details.					
	_	on Who Received Transfer		Description and value of property transferred	payment	e any property or s received or debts exchange	Date transfer was made
	Pers	on's relationship to you			paid III e	Acrianye	

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	otor 1 Christopher Thomas Smith Ditor 2 Brandy Lynn Smith		Case	number (if known)	
	Within 10 years before you filed for bankru beneficiary? (These are often called asset-p.  No		any property to a self-so	ettled trust or similar devic	e of which you are a
	Yes. Fill in the details.				
	Name of trust	Description and	I value of the property t	ransferred	Date Transfer was made
Part	t 8: List of Certain Financial Accounts, In	nstruments, Safe Depo	sit Boxes, and Storage	Units	
	Within 1 year before you filed for bankrupt sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, assolution No  Yes. Fill in the details.	or other financial acco	unts; certificates of de		
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	Wells Fargo Constant Friendship Abingdon, MD 21009	XXXX-8828	■ Checking □ Savings □ Money Market □ Brokerage □ Other	Jan. 12, 2019	\$400.00
	Do you now have, or did you have within 1 cash, or other valuables?  No Yes. Fill in the details.	year before you filed f	or bankruptcy, any safe	e deposit box or other depo	ository for securities,
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had a Address (Number State and ZIP Code)		ribe the contents	Do you still have it?
22.	Have you stored property in a storage unit  No Yes. Fill in the details.	or place other than yo	ur home within 1 year b	efore you filed for bankrup	otcy?
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has o to it? Address (Number State and ZIP Code)		ribe the contents	Do you still have it?
Pari	t 9: Identify Property You Hold or Control	I for Someone Else			
	Do you hold or control any property that so for someone.	omeone else owns? Ind	clude any property you	borrowed from, are storing	g for, or hold in trust
	■ No □ Yes. Fill in the details.				
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City Code)		ribe the property	Value

Debtor 1 Christopher Thomas Smith
Debtor 2 Brandy Lynn Smith

Case number (if known)

Part 10:	<b>Give Details</b>	<b>About</b>	<b>Environmental</b>	Information
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For	the purpose of Part 10, the following d	efinitions	apply:					
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.							
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.							
	Hazardous material means anything a hazardous material, pollutant, contam			s was	te, hazardous substance, toxic	substance,		
Rep	oort all notices, releases, and proceedir	ngs that yo	ou know about, regardless of wher	n they	occurred.			
24.	Has any governmental unit notified yo	ou that you	ı may be liable or potentially liable	unde	er or in violation of an environn	nental law?		
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP C	Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		Environmental law, if you know it	Date of notice		
25.	Have you notified any governmental u	ınit of any	release of hazardous material?					
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP (	Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		Environmental law, if you know it	Date of notice		
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.							
	■ No □ Yes. Fill in the details.							
	Case Title Case Number		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Natu	ure of the case	Status of the case		
Par	rt 11: Give Details About Your Busine	ss or Con	nections to Any Business					
27.	Within 4 years before you filed for bar	nkruptcy, c	did you own a business or have ar	ny of t	the following connections to a	ny business?		
	☐ A sole proprietor or self-emple	oyed in a t	rade, profession, or other activity,	eithe	er full-time or part-time			
	☐ A member of a limited liability	company	(LLC) or limited liability partnersh	ip (Ll	LP)			
	☐ A partner in a partnership							
	☐ An officer, director, or manag	ing execut	ive of a corporation					
	☐ An owner of at least 5% of the	voting or	equity securities of a corporation					

Official Form 107

**Business Name** 

(Number, Street, City, State and ZIP Code)

Address

Describe the nature of the business

Name of accountant or bookkeeper

No. None of the above applies. Go to Part 12.

Yes. Check all that apply above and fill in the details below for each business.

**Employer Identification number** 

Dates business existed

Do not include Social Security number or ITIN.

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Debtor 1 Debtor 2	Christopher Thomas Smith Brandy Lynn Smith			Case number (if known)	
	n 2 years before you filed for bankrup utions, creditors, or other parties.	tcy, did you give	a financial statement to	anyone about your bu	usiness? Include all financial
_	No Yes. Fill in the details below.				
Nam Addı (Numb	-	Date Issued			
Part 12:	Sign Below				
with a ban 18 U.S.C.	nd correct. I understand that making a hkruptcy case can result in fines up to §§ 152, 1341, 1519, and 3571.	\$250,000, or imp /s/ Br	orisonment for up to 20 you		
Christopher Thomas Smith Signature of Debtor 1		Brandy Lynn Smith Signature of Debtor 2			
Date M	arch 29, 2019	Date	March 29, 2019		
Did you at ■ No □ Yes	ttach additional pages to Your Stateme	ent of Financial .	Affairs for Individuals Fili	ing for Bankruptcy (O	fficial Form 107)?
Did you pa	ay or agree to pay someone who is no	t an attorney to	help you fill out bankrupt	cy forms?	
☐ Yes. Na	ame of Person Attach the Bankru	ıptcy Petition Prej	parer's Notice, Declaration,	and Signature (Official	l Form 119).

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

# **United States Bankruptcy Court District of Maryland**

In re	Brandy Lynn Smith	Case No.	
		Debtor(s)	Chapter 7
	VER	IFICATION OF CREDITOR	MATRIX
he ab	ove-named Debtors hereby verify	that the attached list of creditors is true and	correct to the best of their knowledge.
Date:	March 29, 2019	/s/ Christopher Thomas Smit	h
			==
		Christopher Thomas Smith	
Date:	March 29, 2019	Christopher Thomas Smith	
Date:	March 29, 2019	Christopher Thomas Smith Signature of Debtor	

**Christopher Thomas Smith** 

Amerimark Premier PO Box 2845 Monroe, WI 53566

APGFCU PO Box 1176 Aberdeen, MD 21001

Capital One PO Box 71083 Charlotte, NC 28272

Capital One PO Box 71083 Charlotte, NC 28272

Card Services PO Box 84064 Columbus, GA 31908

Carol Wright Gifts PO Box 2852 Monroe, WI 53566

CBCS PO Box 163279 Columbus, OH 43216-3279

CCS
Payment Processing Center
PO Box 55126
Boston, MA 02205-5126

Comenity - Venus PO Box 659617 San Antonio, TX 78265 Comenity Bank - Jessica London PO Box 659728 San Antonio, TX 78265

Comenity Capital Bank/JD Williams PO Box 659707 San Antonio, TX 78265

Comenity-Bryland Home PO Box 659728 San Antonio, TX 78265

Comenity/Capital One Bank/Improvements PO Box 659707 San Antonio, TX 78265

Comptroller of Maryland Revenue Administration Division PO Box 2601 Annapolis, MD 21404

Country Door 1112 7th Avenue Monroe, WI 53566

Credit One Bank PO Box 98872 Las Vegas, NV 89193

Credit One Bank PO Box 98872 Las Vegas, NV 89193

Direct Charge 1112 7th Avenue Monroe, WI 53566 Encore Receivable Management, Inc. 400 N. Rogers Rd.

Encore Receivable Management, Inc. 400 N. Rogers Rd. PO Box 3330 Olathe, KS 66063

Figis Gallery Home & Gifts PO Box 77001 Madison, WI 53707

First Premier Bank PO Box 5529 Sioux Falls, SD 57117

First Premier Bank PO Box 5529 Sioux Falls, SD 57117

Internal Revenue Service Cincinnati, OH 45999

K. Jordan
PO Box 2809
Monroe, WI 53566

Masseys PO Box 2822 Monroe, WI 53566

Mercury Card/FB&T PO Box 84064 Columbus, GA 31908

Midnight Velvet 1112 7th Avenue Monroe, WI 53566

Miles Kimball PO Box 2860 Monroe, WI 53566

Monroe and Main 1112 7th Avenue Monroe, WI 53566

Montgomery Ward 1112 7th Avenue Monroe, WI 53566

NMAC PO Box 660577 Dallas, TX 75266

North Shore Agency ND4 PO Box 9205 Old Bethpage, NY 11804

PayPal Credit PO Box 71202 Charlotte, NC 28272

PayPal Credit PO Box 71202 Charlotte, NC 28272

Roaman's PO Box 659728 San Antonio, TX 78265 Seventh Avenue 1112 7th Avenue Monroe, WI 53566

Stoneberry PO Box 2820 Monroe, WI 53566

Synchrony Bank/AEO, Inc. PO Box 530942 Atlanta, GA 30353

Synchrony Bank/Amazon PO Box 960013 Orlando, FL 32896

Synchrony Bank/Mattress Firm c/o Mattress Firm In Store/SYNCHB PO Box 960061 Orlando, FL 32896

Synchrony Bank/Walmart PO Box 530927 Atlanta, GA 30353

Transworld Systems PO Box 15273 Wilmington, DE 19850

Webbank/Fingerhut PO Box 70281 Philadelphia, PA 19176

Wells Fargo Bank NA PO Box 71118 Charlotte, NC 28272

Wells Fargo Card Services PO Box 77053 Minneapolis, MN 55480

Wells Fargo Card Services PO Box 77053 Minneapolis, MN 55480-7753